#19#.~_	•		
7	The state of the s		
	PLACE OF BIRTH	The second of th	
	L County of Mary o SUPPLEMENT ATTACHED ARI	ZONA STATE BOARD OF HEALTH	and the same
	Production of the state of the	and the Life	
	That he was a sure of the		
- · · · · · · · · · · · · · · · · · · ·	original certif	ICATE OF BIRTH County Registrar No.	aa
Light will be	9r	Local Registrar No. 34	
	y of	urrowil) a hospital or institution, give its NAME instead of street and nu	Ward Imber)
	Full name of child Milliam Leoslore	[If child is not yet named, supplemental report, as di	
is to saidy-light of	iex of Child To be answered ONLY 4. Twin, triplet or other		rected.
	in event of plural	180 7. Date 2-4-92	G lard
Janes &		Month Day Yes	er)
	FATHER	14. MOTHER	ted.
	name Tred & Probat	Full maiden name Elola Ralston	
	lesidence (Usual place of abode) Holbroot	15 Residence	—_ :6 }
		(Usual place of abode) / Voller	
	non-resident, give place and state.	If non-resident, give place and state.	🐇
	Color or race	16 Color or race	
	Wule 11. Age at last birthday 38 (Years)	Whate 17. Age at last birthday 28	Years)
《	Birthplace (city or place)	18. Birthplace (city or place)	- j
	(State or country)	(State or country)	- I
	Occupation Rute Muchanic	19. Occupation	D.
t page to the field	Rature of Industry	Nature of industry	
	7. Number of children of this mother (a) Born alive and now livi		
	(Taken as of time of birth of child herein certified and including this child.) (c) Stillborn	0 /25	
	CERTIFICATE OF ATTENDING	PHYSICIAN OR MIDWIFE*	[
	I hereby certify that I attended the birth of this child, who was (1)	Born alive or stillborn	tated
	*When there was no attending physician or midwife, then the father, householder,	- Homeson Zud.	
	elc., should make this return. A stillhorn >	(Physician or midwife)	
	child is one that neither breathes nor shows other evidence of life after birth.	Word of Can	一 万潭
The same and	Given name added from 2 g supplemental report Filed 2	-7 1976 Nothlison	し劉
igar kalandika	Month, day, year	Local Registi	rar.
-1.30	Registrar Filed	19 County Poster	
	673-20	4-598	一人
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